

BROWN COUNTY HEALTH & HUMAN SERVICES

111 N. Jefferson Street
P.O. Box 22188
Green Bay, WI 54305-2188



Phone (920) 448-6000 Fax (920) 448-6166

Dear Applicant:

Thank you for your interest in the Parent Pal Program. You will find a description of this volunteer position and application items enclosed with this letter. As you complete the application, please note that we ask for three references. These individuals should not be related to you. We prefer you choose someone who knows you well enough to answer questions about your reliability, cooperativeness, maturity, and general values and habits. Please notify the individuals you give as references that they will be receiving a questionnaire from us. Their prompt return of this questionnaire will expedite processing your application.

For your application to be considered complete please return the following items:

- Application
- Confidentiality Agreement
- Background Information Disclosure Form
- Copy of your driver's license
- Verification of your auto insurance

Applications can be returned to:

Brown County Health & Human Services Department
Attn: Volunteer Services
111 N Jefferson St
PO Box 22188
Green Bay, WI 54305-2188

After all of the questionnaires and background check information has been received, you will be contacted for an interview and orientation. If you have any questions, please feel free to contact me via phone or email: 920-448-6023 or Jenna.Durkee@browncountywi.gov

Sincerely,

Jenna Durkee, MSW, APSW
Social Worker/Volunteer Coordinator
Brown County Health & Human Services Department

